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16 SEP 16 PHI2: 55

J. HARRIE

COVER LETTER

Division of Corporations					
HNR LAWN SERVICES LLC					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter	to the following:				
MONICA OROZCO					
Name of Person					
MONITAX LLC					
Firm/Company					
1404 E SILVER STAR RD					
Address					
OCOEE FLORIDA, 34761					
City/State and Zip Code					
monica@monitaxpro.com					
E-mail address: (to be used for future annual report	t notification)				
For further information concerning this matter, please ca	all:				
MONICA OROZCO at (715-9496				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount	:				
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: HNR LAWN SI	ERVI	CES LLC		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1272 TARATINE DRIVE 1272		1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ARATINE DRIVE	
	WINTER GARDEN FLORIDA, 34787	_	WINTER	R GARDEN FLORIDA, 34787	
	08/30/2016		L1600016	63056	
3. 5. (a)	Date of filing/registration in Florida RAFAEL HERNANDEZ	4.		Document number	
	Registered Agent and Registered Office shown on the records of the Partial Hamble 2 Registered Office Address (MUST BE FLORIDA STREET ADDRESS 1272 TARATINE DRIVE			e: -	
(b)	Parael Hernandez Par	34787	-ک	16 SEP 16 SECKLARA	
	Enter name of NEW Registered Agent and/or NEW Registered C	Office ac	<u>ldress</u> :	PHI2: 55	
	NEW Registered Office Address: 1272 TARATINE DRIVE				
	WINTER GARDEN ,FL	34787			
the cha agent v was/wo	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regional the liter the	istered offic ompany, it i nited liabilit	e and the business office of the registered s hereby confirmed that the change(s) sy company or as otherwise provided in	
	ture of a member or authorized representative of a member		•	RNANDEZ	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mero notified	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to ac verforn for in ereby c	t in this cap nance of my Chapter 60: confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been	

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent